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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name S Middle name Barrett Last name and Suffix (Sr., Jr., II, III)	Elizabeth First name A Middle name Barrett Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0984	xxx-xx-4077

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Debtor 1
Debtor 2

Jeffrey S Barrett
Elizabeth A Barrett

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	5519 Selu Dr.	If Debtor 2 lives at a different address:			
		Liberty Township, OH 45011 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Butler				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 2 Elizabeth A Barrett Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? □ Yes. No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

Jeffrey S Barrett

Debtor 1

Case 1:18-bk-11567 Doc 1 Filed 04/26/18 Entered 04/26/18 13:47:56 Desc Main Document Page 4 of 68 **Jeffrey S Barrett** Debtor 1 Debtor 2 Elizabeth A Barrett Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ☐ No. of any full- or part-time Go to Part 4. business? Name and location of business Yes. A sole proprietorship is a business you operate as **Pampered Chef** an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. One Pampered Chef Lane If you have more than one Addison, IL 60101 sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is immediate attention? needed, why is it needed? For example, do you own

Number, Street, City, State & Zip Code

Where is the property?

perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Jeffrey S Barrett
Debtor 2 Elizabeth A Barrett

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 1:18-bk-11567 Doc 1 Filed 04/26/18 Entered 04/26/18 13:47:56 Desc Main

Document Page 6 of 68 **Jeffrey S Barrett** Debtor 1 Debtor 2 Elizabeth A Barrett Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey S Barrett /s/ Elizabeth A Barrett Jeffrey S Barrett Elizabeth A Barrett Signature of Debtor 1 Signature of Debtor 2 Executed on April 26, 2018 Executed on April 26, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1	Jeffrey S Barrett	3	
Debtor 2	Elizabeth A Barrett	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

Bar number & State

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Nichola	as A. Zingarelli	Date	April 26, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
	A. Zingarelli OH-0079110		
Printed name Zingarelli	Law Office, LLC		
Firm name			
•	nore Street		
Third Floo	r		
Cincinnati	, OH 45202		
Number, Street,	City, State & ZIP Code		
Contact phone	513-381-2047	Email address	nick@zingarellilaw.com
OH-007911	10 OH		

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		1706.000	ill Fau l o ul uo	
Fill in this inform	ation to identify your	case:		
Debtor 1	Jeffrey S Barrett			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth A Barre	tt		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file vour original forms, you must fill out a new Summary and check the box at the top of this page.

	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	233,160.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	145,916.30
	1c. Copy line 63, Total of all property on Schedule A/B	\$	379,076.3
Pai	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	226,531.97
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	27,926.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	69,384.0
	Your total liabilities	\$	323,842.02
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,690.1
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,389.82
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Dobtor 1	I-# O D	Document	Page 9 of 6
	Jeffrey S Barrett Elizabeth A Barrett		Case nui
DODIO: L	Elizabetti A Darrett		Case Hu

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

11,477.30

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	27,926.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	12,843.28
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	40,769.28

	Cas	se 1:18-b	k-115	567 Doc 1		ed 04/2 cument		Entered 04/26 age 10 of 68	6/18 13:47	:56	Des	sc Main
Fill	in this info	ormation to i	dentify	your case and t			F 6	de 10 01 08				
Deb	otor 1	Jeffrey	/ S Baı	rrett								
D - I	-40	First Name			e Name		Last	Name				
	otor 2 ouse, if filing)	First Name		Barrett Midd	e Name		Last	Name				
Uni	ted States	Bankruptcy C	ourt for	the: SOUTHER	RN DIST	RICT OF C	OHIO					
											_	
Cas	se number											Check if this is an amended filing
S on ea	chedu ich category c it fits best.	, separately lis Be as comple ore space is n	Prest and detected and a	coperty escribe items. List	le. If two	married pe	ople are f	set fits in more than one filing together, both are of any additional pages,	equally respons	ible for su	upply	ing correct
Part	t 1: Descri	be Each Reside	ence, Bu	ıilding, Land, or O	ther Rea	l Estate You	Own or	Have an Interest In				
. D	o you own o	or have any leg	al or equ	uitable interest in	any resid	dence, build	ing, land,	, or similar property?				
	No. Go to F	Part 2.										
	Yes. Wher	e is the property	y?									
1.1					Wha	t is the prop	ertv? Che	eck all that apply				
	5519 Se	lu Dr.				Single-fam	•	,,	Do not deduct	secured cl	aims	or exemptions. Put
	Street addre	ss, if available, or	other desc	ription				-				ms on <i>Schedule D:</i> ecured by Property.
						Manufactu	ired or mo	obile home	Current value	of the	Cu	rrent value of the
		Township	ОН	45011-0000	. 📮				entire propert	y?	ро	rtion you own?
	City		State	ZIP Code		Investmen Timeshare		<i>'</i>		160.00		\$233,160.00
						Other _			(such as fee s	imple, ten		wnership interest by the entireties, or
					Who			e property? Check one	a life estate), i	f known.		
	Butler					Debtor 2 o	•					
	County					Debtor 1 a		r 2 only	— Chack if t	hie ie con	nmun	ity property
						711 10001 011		debtors and another	(see instruc		iiiiuii	ity property
						er informatio erty identific	-	sh to add about this iten ımber:	n, such as local			
						-						
								Part 1, including any				£222 400 00
												\$233,160.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Debtor Debtor		effrey S Barre lizabeth A Bai			Case number (if known)	
. Cars		trucks, tractors	s, sport utility ve	hicles, motorcycles		
■ Y	-					
	Make: Model:	Honda Odyssey		Who has an interest in the property? Check one Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
		2006 nate mileage: cormation:	107000	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Current value of entire property?	the Current value of the portion you own?
				☐ Check if this is community property (see instructions)	\$3,200	.00 \$3,200.00
	Make: Model:	Hyundai Tucson		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
		2013 nate mileage: ormation:	51000	□ Debtor 2 only■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Current value of entire property?	the Current value of the portion you own?
				☐ Check if this is community property (see instructions)	\$7,625	\$7,625.00
	Make: Model:	Toyota Camry		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
		2007 nate mileage: ormation:	103000	 □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	Current value of entire property?	the Current value of the portion you own?
				☐ Check if this is community property (see instructions)	\$3,370	3,370.00
	<i>nples:</i> Bo o			d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcyc		
				n for all of your entries from Part 2, includin that number here		\$14,195.00
			and Household Ite	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa	amples: I No	goods and furn Major appliances scribe		, china, kitchenware		

Official Form 106A/B Schedule A/B: Property page 2

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Jeffrey S Barrett

Case number (# known)

Debtor 1 Debtor 2	Jeffrey S Barrett Elizabeth A Barrett Case number (if known)
	Refrigerator \$400, Oven \$300, Dishwasher \$100, Microwave \$75, Dining Table & Chairs \$150, Sofa \$200, Chairs (3) \$175, Bookshelf \$20, Table \$40, Washer \$150, Dryer \$150, Lawn Mower \$75, Power Tools \$100, Misc. Tools \$150, Lawn Furniture \$80, Grill \$40, Queen Beds (2) \$200, Nightstands (3) \$75, Full Bed \$75, Dresser \$50, Twin Bed \$50	\$2,655.00
□No	nics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games Describe	collections; electronic devices
	37" Televisions (3) \$300, 40" Television \$200, 55", Television \$600, Computer \$400, Printer \$75, Monitor \$150, Roku \$40, DVD Player \$50	\$1,815.00
Example No	bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi other collections, memorabilia, collectibles Describe	n, or baseball card collections;
Example No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments Describe	s and kayaks; carpentry tools;
■ No	ns bles: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
□ No	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Women's Clothing \$200, Men's Clothing \$500, Children's Clothing \$200	\$900.00
□ No	y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, Describe	gold, silver
	Gold Ring \$750	\$750.00
Exam _l ■ No □ Yes.	rm animals bles: Dogs, cats, birds, horses Describe her personal and household items you did not already list, including any health aids you did not list	
14. Any o t ■ No	nei personal and nousenoid items you did not already list, including any nealth alds you did not list	

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information.....

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	ebtor 1 ebtor 2	Jeffrey S Barre Elizabeth A Ba				Case number (if known,		
15						including any entries for pages you have attached	\$6,120.00	_
Pa	rt 4: De	scribe Your Financia	l Assets					
		vn or have any leg		itable interest	t in any o	f the following?	Current value of the portion you own? Do not deduct secure claims or exemptions	ed
	□ No ·	oles: Money you hav	·	•		a safe deposit box, and on hand when you file your petil	ion	
						Cash	\$37	.00
	Examp					certificates of deposit; shares in credit unions, brokerage ne same institution, list each. Institution name:	houses, and other similar	
			17.1. C	Checking		Key Bank ending in 3370	\$426	.57
			17.2. S	avings		Key Bank ending in 3155	\$2	.39
	Examp ■ No □ Yes Non-pu		vestment	accounts with	brokerag uer name:	e firms, money market accounts and unincorporated businesses, including an intere	st in an LLC, partnership, a	and
	☐ Yes.	Give specific inform		out them of entity:		% of ownership:		
	Negoti Non-ne ■ No	<i>iable instrument</i> s ind	clude pers ts are tho	sonal checks, ose you cannot	cashiers'	and non-negotiable instruments checks, promissory notes, and money orders. o someone by signing or delivering them.		
		ment or pension acoles: Interests in IRA		Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or profit-sharing	ı plans	
	Yes.	List each account s	eparately Type of a			Institution name:		
			401(k)		-	Fidelity- IBM 401(k)	\$125,135	.34
22.	Your s Examp		deposits y	ou have made		ou may continue service or use from a company utilities (electric, gas, water), telecommunications compa	nies, or others	
	■ No □ Yes.					Institution name or individual:		

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Jeffrey S Barrett
Elizabeth A Barrett

Case number (if known)

Debtor 1 Debtor 2	Jeffrey S Barrett Elizabeth A Barrett		Case number (if know	wn)
23. Annuit ■ No	ies (A contract for a periodic payment	t of money to you, either for	life or for a number of years)	
☐ Yes	Issuer name and descr	ription.		
26 U.S.	ts in an education IRA, in an account C. §§ 530(b)(1), 529A(b), and 529(b)(gram, or under a qualified state tuition	program.
■ No □ Yes	Institution name and de	escription. Separately file the	e records of any interests.11 U.S.C. § 521	(c):
	, equitable or future interests in pro	perty (other than anything	g listed in line 1), and rights or powers	exercisable for your benefit
■ No □ Yes.	Give specific information about them			
	s, copyrights, trademarks, trade sec les: Internet domain names, websites			
	Give specific information about them			
	es, franchises, and other general ir oles: Building permits, exclusive licens		n holdings, liquor licenses, professional lice	enses
	Give specific information about them			
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	iunds owed to you Give specific information about them,	including whether you alrea	ady filed the returns and the tax years	
■ No		pousal support, child suppo	ort, maintenance, divorce settlement, propo	erty settlement
Examp ■ No	amounts someone owes you oles: Unpaid wages, disability insurand benefits; unpaid loans you made Give specific information		efits, sick pay, vacation pay, workers' com	npensation, Social Security
	ts in insurance policies oles: Health, disability, or life insurance	e; health savings account (F	HSA); credit, homeowner's, or renter's inst	urance
■ Yes.	Name the insurance company of each Company name		Beneficiary:	Surrender or refund value:
	State Farm II for Elizabeth	nsurance- Term Life Po Barrett	Jeffrey Barrett	\$0.00
	State Farm I for Jeffrey B	nsurance- Term Life Po arrett	olicy Elizabeth Barrett	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Case 1:18-bk-11567 Doc 1 Filed 04/26/18 Entered 04/26/18 13:47:56 Desc Main Page 15 of 68 Document Jeffrey S Barrett Debtor 1 Debtor 2 Elizabeth A Barrett Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$125,601,30 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Document Page 16 of 68 Jeffrey S Barrett

Debtor 1
Debtor 2

Jeffrey S Barrett
Elizabeth A Barrett

Case number (if known)

List the Totals of Each Part of this Form

56. Part 2: Total vehicles, line 5 \$14,195.00

57. Part 3: Total personal and household items, line 15 \$6,120.00

58. Part 4: Total financial assets, line 36 \$125,601.30

59. Part 5: Total business-related property, line 45 \$0.00

59. Part 5: Total business-related property, line 45 \$0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

61. Part 7: Total other property not listed, line 54 + \$0.00

62. **Total personal property.** Add lines 56 through 61... \$145,916.30 Copy personal property total \$145,916.30

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$379,076.30

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		1/////////	$m = m \cdot $	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jeffrey S Barrett			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth A Barre	ett		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Id	entify the	Property	/ You C	Claim as	Exemp	١t
------------	------------	----------	---------	----------	-------	----

1.	Which set of exemptions are you claiming	Check one only, eve	en if your spouse is filing	with you
----	--	---------------------	-----------------------------	----------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
5519 Selu Dr. Liberty Township, OH 45011 Butler County	\$233,160.00		\$100,000.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2525.65(1.)(1.)
2006 Honda Odyssey 107000 miles Line from Schedule A/B: 3.1	\$3,200.00		\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
Life Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	2020.00(7)(10)
2007 Toyota Camry 103000 miles	\$3,370.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
and norm dericable Arb. G.C			100% of fair market value, up to any applicable statutory limit	2020.00(7)(2)
Refrigerator \$400, Oven \$300, Dishwasher \$100, Microwave \$75,	\$2,655.00		\$2,655.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Dining Table & Chairs \$150, Sofa \$200, Chairs (3) \$175, Bookshelf \$20, Table \$40, Washer \$150, Dryer \$150, Lawn Mower \$75, Power Tools \$100, Misc. Tools \$150, Lawn Furniture \$80, Grill \$40, Quee			100% of fair market value, up to any applicable statutory limit	2020.00(F)(4)(a)

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Jeffrey S Barrett Debtor 1 Elizabeth A Barrett Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 37" Televisions (3) \$300, 40" Ohio Rev. Code Ann. § \$1,815.00 \$1,815.00 Television \$200, 55", Television \$600, 2329.66(A)(4)(a) Computer \$400, Printer \$75, Monitor 100% of fair market value, up to \$150, Roku \$40, DVD Player \$50 any applicable statutory limit Line from Schedule A/B: 7.1 Women's Clothing \$200, Men's Ohio Rev. Code Ann. § \$900.00 \$900.00 Clothing \$500, Children's Clothing 2329.66(A)(4)(a) \$200 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 11.1 Ohio Rev. Code Ann. § Gold Ring \$750 \$750.00 \$750.00 2329.66(A)(4)(b) Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Ohio Rev. Code Ann. § Cash \$37.00 \$37.00 Line from Schedule A/B: 16.1 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Checking: Key Bank ending in 3370 Ohio Rev. Code Ann. § \$426.57 \$426.57 Line from Schedule A/B: 17.1 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Savings: Key Bank ending in 3155 Ohio Rev. Code Ann. § \$2.39 \$2.39 Line from Schedule A/B: 17.2 2329.66(A)(3) П 100% of fair market value, up to any applicable statutory limit 401(k): Fidelity- IBM 401(k) 11 U.S.C. § 522(b)(3)(C) \$125,135.34 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit State Farm Insurance- Term Life Ohio Rev. Code Ann. §§ \$0.00 100% **Policy for Elizabeth Barrett** 2329.66(A)(6)(b), 3911.10, **Beneficiary: Jeffrey Barrett** 3911.12, 3911.14 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit State Farm Insurance- Term Life Ohio Rev. Code Ann. §§ 100% \$0.00 **Policy for Jeffrey Barrett** 2329.66(A)(6)(b), 3911.10, **Beneficiary: Elizabeth Barrett** 100% of fair market value, up to 3911.12, 3911.14 Line from Schedule A/B: 31.2 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160.375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

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		Document	Page 1	9 of 68	_	
Fill in this information to ide	ntify your case:					
Debtor 1 Jeffrey S		Middle Name	Last Name			
	h A Barrett	madic Hamo	Last Hamo			
(Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Cou	rt for the: SOUT	THERN DISTRICT OF O	HIO			
,						
Case number						
(if known)						if this is an
					amend	led filing
Official Form 106D						
	!!+ \A/I		C	al lass Danas a satu	_	
Schedule D: Cred	litors wno	Have Claims	Secure	ed by Property	<u>/</u>	12/15
Be as complete and accurate as p is needed, copy the Additional Pa number (if known).						
1. Do any creditors have claims s	ocured by your pror	oortu?				
	,, , ,	•		V b	non-out on this forms	
☐ No. Check this box and	submit this form to	tne court with your otne	r schedules.	You have nothing else to	report on this form.	
Yes. Fill in all of the info	ormation below.					
Part 1: List All Secured Cl	laims					
2. List all secured claims. If a cre	editor has more than o	one secured claim, list the cr	editor separate	Column A	Column B	Column C
for each claim. If more than one cr	reditor has a particula	r claim, list the other credito	rs in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in	alphabetical order ad	cording to the creditor's nar	ne.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Chemical Bank	Describe	the property that secures	the claim:	\$210,152.00	\$233,160.00	\$0.00
Creditor's Name		elu Dr. Liberty Town Butler County	ship, OH			
1726 Comen Borlovey	As of the	date you file, the claim is	: Check all that			
1736 Gezon Parkway Wyoming, MI 49519	αρρ.у.					
Number, Street, City, State & Zip	Code Contir	•				
Number, Street, City, State & Zip	Code Unliqu					
Who owes the debt? Check one		of lien. Check all that apply.				
Debtor 1 only	_	reement you made (such as		secured		
Debtor 2 only	car lo					
■ Debtor 1 and Debtor 2 only	☐ Statut	ory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and	another	nent lien from a lawsuit				
☐ Check if this claim relates to	•	(including a right to offset)				
community debt		,				
Date debt was incurred 2017	La	est 4 digits of account num	nber <u>3158</u>	<u> </u>		
2.2 Day Air Credit Union	Describe	the property that secures	the claim:	\$16,379.97	\$7,625.00	\$8,754.97
Creditor's Name		yundai Tucson 5100		Ψ10,573.37	Ψ1,023.00	Ψ0,134.31
	201311	yunuan nuoson shoo	o illies			
3501 Wilmington Pike	e As of the apply.	date you file, the claim is	: Check all that			
Dayton, OH 45429	Contir	ngent				
Number, Street, City, State & Zip	Code Unliqu	uidated				
	☐ Dispu					
Who owes the debt? Check one	e. Nature o	of lien. Check all that apply.				
Debtor 1 only	•	reement you made (such as	mortgage or s	secured		
Debtor 2 only	car lo	,				
Debtor 1 and Debtor 2 only		ory lien (such as tax lien, me	echanic's lien)			
At least one of the debtors and	_ ~	nent lien from a lawsuit				
☐ Check if this claim relates to community debt	a Other	(including a right to offset)	Purchase	Money Security		
Date debt was incurred 7/7/20	015	est 4 digits of account num	nher 7550	1		

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Debtor 1	Jeffrey S Barret	tt		Case number (if know)	
	First Name	Middle Name	Last Name	_	
Debtor 2	Elizabeth A Bar	rett			
	First Name	Middle Name	Last Name		
					-
Add the	dollar value of your e	entries in Column A on	this page. Write that number here:	\$226,531.97	
	the last page of your at number here:	form, add the dollar va	alue totals from all pages.	\$226,531.97	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case	T.19-0K-T1301	DOC I	Document		21 of 6	U4/20/18 13.4 80	47.50 Desc	Main
Fill	l in this informa	ation to identify your ca	ase:	Document	Paue	Z I UI (20		
	btor 1	Jeffrey S Barrett							
De	DIOI I	First Name	Middle	Name	Last Name	Э			
De	btor 2	Elizabeth A Barrett	t						
(Sp	ouse if, filing)	First Name	Middle	Name	Last Nam	Э			
Un	ited States Banl	kruptcy Court for the:	SOUTHER	RN DISTRICT OF O	HIO				
Ca	se number								
(if k	nown)							_	if this is an led filing
∩f	ficial Form	106E/F							
		F: Creditors Wh	no Have	e Unsecured	Claim	S			12/15
Sch eft.	edule D: Creditor	ory Contracts and Unexpirers Who Have Claims Secur Inuation Page to this page ber (if known).	red by Prope	erty. If more space is	needed, co	py the Part	you need, fill it out, i	number the entries i	n the boxes on the
Pa	rt 1: List All	of Your PRIORITY Uns	ecured Cla	aims					
1.	Do any creditor	s have priority unsecured	claims agai	nst you?					
	☐ No. Go to Par	rt 2.							
	Yes.								
2.	identify what type possible, list the	oriority unsecured claims. e of claim it is. If a claim has claims in alphabetical order an one creditor holds a parti	both priority according to	and nonpriority amour the creditor's name. If	nts, list that of you have m	claim here ar	nd show both priority a	nd nonpriority amoun	ts. As much as
	(For an explanati	ion of each type of claim, se	e the instruct	tions for this form in the	e instruction	booklet.)	Total claim	Priority amount	Nonpriority amount
2.1	Internal I	Revenue Service	ı	Last 4 digits of accou	unt number	0984	\$25,858.00	\$25,858.00	\$0.00
	Priority Cred	7346		When was the debt ir	ncurred?	2017			- · · · · · · · · · · · · · · · · · · ·
		ohia, PA 19101-7346		A	. 411-:	: Ob I	II 4b = 4 = = = b .		
		eet City State Zlp Code the debt? Check one.		As of the date you file Contingent	e, the claim	is: Check a	п тат арріу		
	Debtor 1 on			_					
	Debtor 2 on	,		☐ Unliquidated					
	_	d Debtor 2 only		☐ Disputed Type of PRIORITY un	secured of	ıim:			
	_	,		Domestic support of					
	_	of the debtors and another		_	J				
	☐ Check if thi	is claim is for a communit	ty debt	Taxes and certain of	other debts y	ou owe the	government		

 $\hfill \square$ Claims for death or personal injury while you were intoxicated

Income tax liability

☐ Other. Specify

Is the claim subject to offset?

■ No

☐ Yes

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2.2	or 2 Elizabeth A Barrett		Case n	umber (if know)		
	Ohio Department of Taxation	Last 4 digits of account number	0984	\$2,068.00	\$2,068.00	\$0.00
	Priority Creditor's Name Bankruptcy Division PO Box 530	When was the debt incurred?	2017			
	Columbus, OH 43216-0530		_			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all	that apply		
	Debtor 1 only	☐ Contingent				
	_	Unliquidated				
	Debtor 2 only	☐ Disputed				
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	overnment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	were intoxicated		
	■ No	Other. Specify				
	☐ Yes	Income tax	liability			
4. L u th	Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify wh	at type of cla	im it is. Do not list claims	s already included in Par	t 1. If more
					Total clai	11 age of
4.1	Ace Exterminating	Land A. Patter of a control of	5000			, and the second
	Nonpriority Creditor's Name	Last 4 digits of account numb	er <u>5836</u>			, and the second
	1920 Losantiville Cincinnati, OH 45237	When was the debt incurred?	er <u>5836</u>			m .
		_		all that apply		m .
	Cincinnati, OH 45237 Number Street City State Zlp Code	When was the debt incurred?		all that apply		m .
	Cincinnati, OH 45237 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the cla		all that apply		m .
	Cincinnati, OH 45237 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	When was the debt incurred? As of the date you file, the cla		all that apply		m .
	Cincinnati, OH 45237 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the cla	m is: Check	all that apply		m .
	Cincinnati, OH 45237 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed	m is: Check	all that apply		m .
	Cincinnati, OH 45237 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	When was the debt incurred? As of the date you file, the class of the date you file, the date	m is: Check ured claim: eparation agi	reement or divorce that y	ou did not	m .
	Cincinnati, OH 45237 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of NONPRIORITY unsect Student loans Obligations arising out of a sreport as priority claims Debts to pension or profit-sh	m is: Check red claim: eparation ago	reement or divorce that y		m .

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Debtor 2	Jeffrey S Barrett Elizabeth A Barrett	Case number (if know)	
	Amazon	Last 4 digits of account number 2358	\$1,120.42
	Nonpriority Creditor's Name PO Box 960013 Orlando, FL 32896	When was the debt incurred?	-
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Balance due for contractor services	-
	Bankcard Services Nonpriority Creditor's Name	Last 4 digits of account number 5385	\$324.69
	30200 Telegraph Rd. Suite 104 Franklin, MI 48025	When was the debt incurred?	-
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify rendered ■ Other Specify	-
	Barclay	Last 4 digits of account number 6226	\$1,756.54
	Nonpriority Creditor's Name PO Box 8803 Wilmington, DE 19801	When was the debt incurred?	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	_

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Debtor 2	Jeffrey S Barrett Elizabeth A Barrett	Case number (if know)	
	Best Buy	Last 4 digits of account number 9846	\$2,325.59
	Nonpriority Creditor's Name PO Box 9312 Minneapolis, MN 55440	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.6	Cabela's Nonpriority Creditor's Name	Last 4 digits of account number 0430	\$3,340.20
	PO Box 82519 Lincoln, NE 68510	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.7	Capital One	Last 4 digits of account number 7967	\$5,072.29
	Nonpriority Creditor's Name P.O. Box 30281	When was the debt incurred?	
-	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	

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Debtor 1 Jeffrey S Barrett Debtor 2 Elizabeth A Barrett Case number (if know) 4.8 **Capital One** Last 4 digits of account number 9639 \$3,958.15 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services Other. Specify rendered ☐ Yes 4.9 **Capital One** Last 4 digits of account number 1943 \$3,107.55 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 30281 Salt Lake City, UT 84130 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services Other. Specify rendered ☐ Yes 4.1 Capital One 0170 \$3,876.89 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services ■ Other. Specify rendered ☐ Yes

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Debtor 1 Jeffrey S Barrett Debtor 2 Elizabeth A Barrett Case number (if know) 4.1 8030 \$580.28 **Compunet Labs** Last 4 digits of account number Nonpriority Creditor's Name 2308 Sandridge Dr. When was the debt incurred? Dayton, OH 45439 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other, Specify Balance due for medical services rendered 4.1 **Credit One Bank** 4827 \$2,017.62 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 60500 When was the debt incurred? City Of Industry, CA 91716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts Balance due for goods and/or services ☐ Yes Other. Specify rendered 4.1 **Credit One Bank** 2305 \$1,247.07 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 60500 City Of Industry, CA 91716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services Other. Specify rendered ☐ Yes

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Debtor 2	1 Jeffrey S Barrett 2 Elizabeth A Barrett		Case number (if know)	
- I	Department of Education/ Mohela	Last 4 digits of account number	1432	\$12,843.28
	Nonpriority Creditor's Name P.O. Box 105347 Atlanta GA 20348-5347	When was the debt incurred?	2012	
-	Atlanta, GA 30348-5347 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		
		Student loa	n	
4.1 5	Direct TV	Last 4 digits of account number	1990	\$488.65
	Nonpriority Creditor's Name PO Box 1259 Oaks, PA 19456	When was the debt incurred?	488.65	
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	a plans, and other similar debts	
	□ Yes		e for goods and/or services	
4.1	Elder Beerman	Last 4 digits of account number	0994	\$1,299.46
	Nonpriority Creditor's Name Retail Services Dept 7680 Carol Stream, IL 60116	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify rendered	e for goods and/or services	

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Debtor 1 Jeffrey S Barrett Debtor 2 Elizabeth A Barrett Case number (if know) 4.1 First National Credit Card 3965 \$574.26 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5097 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Balance due for goods and/or services Other. Specify ☐ Yes rendered 4.1 First Premier Bank 0627 \$1,218.76 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5147 When was the debt incurred? Sioux Falls, SD 57117-5147 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Balance due for goods and/or services ☐ Yes Other. Specify rendered 4.1 First Savings Credit Card 1433 \$1,679.36 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2509 When was the debt incurred? Omaha, NE 68103-2509 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Balance due for goods and/or services Other. Specify rendered ☐ Yes

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Debtor 1 Jeffrey S Barrett Debtor 2 Elizabeth A Barrett Case number (if know) 4.2 \$362.99 **Kettering Health Network** 2122 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 781100 When was the debt incurred? Detroit, MI 48278 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other, Specify Balance due for medical services rendered 4.2 Kohl's 8805 \$1,403.68 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3040 When was the debt incurred? Milwaukee, WI 53201-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services ☐ Yes Other. Specify rendered 4.2 Kohl's 8396 \$1,037.05 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 3040 Milwaukee, WI 53201-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services Other. Specify rendered ☐ Yes

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	1 Jeffrey S Barrett 2 Elizabeth A Barrett	9	Case number (if know)	
4.2	LendUp Visa	Last 4 digits of account number	0670	\$496.00
	Nonpriority Creditor's Name 237 Kearny St #197 San Francisco, CA 94108	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	■ Other. Specify Balance due rendered	for goods and/or services	
4.2				
4	Menard's	Last 4 digits of account number	7902	\$659.50
	Nonpriority Creditor's Name Dept. 7680 Carol Stream, IL 60116	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is:	: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	■ Other. Specify Balance due rendered	for goods and/or services	
4.2	Merrick Bank	Last 4 digits of account number	8878	\$1,766.14
	Nonpriority Creditor's Name PO Box 5000 Draper, UT 84020	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
	_	☐ Student loans		
	☐ Check if this claim is for a community debt		ation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	5 , oa ala	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	■ Other. Specify Balance due rendered	for goods and/or services	

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	1 Jeffrey S Barrett 2 Elizabeth A Barrett		Case number (if know)	
4.2 6	Middletown Cardiovascular	Last 4 digits of account number	0352	\$414.93
	Nonpriority Creditor's Name 103 McKnight Drive Middletown, OH 45044	When was the debt incurred?		
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Balance du	ue for medical services rendered	
4.2	Old Navy/Synchrony Bank	Last 4 digits of account number	6052	\$1,195.58
·	Nonpriority Creditor's Name PO Box 530942	When was the debt incurred?		
	Atlanta, GA 30353 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam	is. Oncor all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Balance durendered	ue for goods and/or services	
4.2	PayPal Credit	Last 4 digits of account number	0000	\$459.00
	Nonpriority Creditor's Name P.O. Box 105658 Atlanta, GA 30348-5658	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
		Balance du	ue for goods and/or services	
	Yes	Other. Specify rendered		

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Debtor 1 Jeffrey S Barrett Debtor 2 Elizabeth A Barrett Case number (if know) **Premier Health- Atrium Medical** 4.2 6396 \$3,825.77 9 Last 4 digits of account number Center Nonpriority Creditor's Name PO Box 182481 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Balance due for medical services rendered ☐ Yes 4.3 \$3.277.24 **Target** 2137 Last 4 digits of account number Nonpriority Creditor's Name PO Box 673 When was the debt incurred? Minneapolis, MN 55440-0673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services ■ Other. Specify rendered ☐ Yes 4.3 **UC Health** 4334 \$2,671.50 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 634856 Cincinnati, OH 45263-4856 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other, Specify Balance due for medical services rendered ☐ Yes

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Debtor 1 Jeffrey S Barrett Debtor 2 Elizabeth A Barrett Case number (if know) 4.3 **UC Health - Cincinnati Physicians** 9043 \$1.549.73 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 630861 When was the debt incurred? Cincinnati, OH 45263 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other, Specify Balance due for medical services rendered 4.3 Walmart 2948 \$1,014.75 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 530927 When was the debt incurred? Atlanta, GA 30353 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts Balance due for goods and/or services ☐ Yes Other. Specify rendered 4.3 Walmart 2948 \$424.62 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 530927 When was the debt incurred? Atlanta, GA 30353 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Balance due for goods and/or services Other. Specify rendered ☐ Yes

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	or 1 Jeffrey S Barrett or 2 Elizabeth A Barrett		Case number (if know)				
4.3 5	Wayfair	Last 4 digits of account number	1735	\$1,594.06			
	Nonpriority Creditor's Name 4 Copley Place, 4th Floor Boston, MA 02116	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts				
	☐ Yes	■ Other. Specify rendered	ue for goods and/or services				
Part	3: List Others to Be Notified About a D	ebt That You Already Listed					
is t	e this page only if you have others to be notified rying to collect from you for a debt you owe to se we more than one creditor for any of the debts the ified for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i nat you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency he	ere. Similarly, if you			
	e and Address	On which entry in Part 1 or Part 2 did yo					
	thland Group	Line <u>4.22</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims				
	Box 390846 neapolis, MN 55439		Part 2: Creditors with Nonpriority Unsecured Claim	ims			
		Last 4 digits of account number	8860				

art 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	27,926.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	27,926.00
				7	Total Claim
	6f.	Student loans	6f.	\$	12,843.28
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	56,540.77
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	69,384.05

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		I A A A A I I I I I I I		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Jeffrey S Barrett			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth A Barre	ett		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO	
Case number				
(ii Kilowii)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olate	Zii Oodo	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	City		Olato	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Docum	ent Page 36 o	f 68	
Fill in this	information to identify you	r case:			
Debtor 1	Jeffrey S Barret				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	rg) Elizabeth A Barı First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF OHIO		
Case numb	ber				
(if known)					☐ Check if this is an amended filing
Official	I Form 106H				
	ule H: Your Cod	debtors			12/15
0	ana maanta ay aastelaa	ana alaa Babis feeren d	hts was been B		anallala If tour
people are fill it out, a	filing together, both are eq	ually responsible for sup e boxes on the left. Attac	oplying correct informat th the Additional Page to	s complete and accurate as pion. If more space is needed, o this page. On the top of any	copy the Additional Page,
1. Do <u>y</u>	you have any codebtors? (I	f you are filing a joint case	, do not list either spouse	as a codebtor.	
■ No					
□ Yes	;				
	h in the last 8 years, have yo a, California, Idaho, Louisiana			y? (Community property states ngton, and Wisconsin.)	and territories include
	Go to line 3.				
☐ Yes	. Did your spouse, former spo	ouse, or legal equivalent li	ve with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make	if your spouse is filing with y sure you have listed the cred 6G). Use Schedule D, Schedu	itor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to Check all schedules that a	whom you owe the debt apply:
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
22				Cohodula D. Kas	
3.2	Name			_ □ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

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Del	otor 1 Jeffrey S	Barrett		
	otor 2 Elizabeth	A Barrett		
Uni	ted States Bankruptcy Court for	the: SOUTHERN DISTRIC	CT OF OHIO	
_	se number nown)		-	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
				13 income as of the following date:
	fficial Form 106I			MM / DD/ YYYY
S	chedule I: Your In	come		12/15
1.	Fill in your employment information. If you have more than one job,	Employment status	Debtor 1 ■ Employed	Debtor 2 or non-filing spouse ■ Employed
			■ Employed	_
	attach a separate page with information about additional	Linployment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Pre-Sales Consultant	Advanced Director
	Include part-time, seasonal, or self-employed work.	Employer's name	IBM Corporation	Pampered Chef
	Occupation may include stude or homemaker, if it applies.	nt Employer's address	1701 North Street Endicott, NY 13760	
		How long employed t	here? 12 years	2 years
Pai	Give Details About	Ionthly Income		
	mate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to report for any	line, write \$0 in the space. Include your non-filing
	u or your non filing anouga have	more than one employer of	ombine the information for all empl	oyers for that person on the lines below. If you need
	e space, attach a separate shee		ombine the information for all empi	byers for that person on the lines below. If you need

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2.	\$_	9,049.59	\$	0.00
3.	+\$_	0.00	+\$	0.00
4.	\$_	9,049.59	\$	0.00

Official Form 106I Schedule I: Your Income page 1

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Jeffrey S Barrett Debtor 1 Elizabeth A Barrett Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 9.049.59 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 2,116.86 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 Voluntary contributions for retirement plans 5c. 5c. 181.00 0.00 5d. Required repayments of retirement fund loans 5d. 1,238.78 0.00 5e. Insurance 5e. 895.52 0.00 5f. Domestic support obligations 5f. 0.00 0.00 5q. Union dues 5q. 0.00 0.00 5h. Other deductions. Specify: Disability 5h.+ 14.10 \$ 0.00 **HSA** \$ 100.00 \$ 0.00 Salvation Army \$ 10.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 6. \$ 4,556.26 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 7 \$ 4.493.33 0.00 List all other income regularly received: 8 Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 2,196.84 8b. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 **Unemployment compensation** hß hß 0.00 0.00 **Social Security** 8e. 0.00 0.00 8e. Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 Pension or retirement income 8g. 8g. 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ \$ 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 2,196.84 Calculate monthly income. Add line 7 + line 9. \$ 10. \$ 4.493.33 2.196.84 \$ 6.690.17 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: +\$ 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 6.690.17 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain: Income for Debtor-husband based upon six month average of actual income received inclusive of commission income. Such income believed to remain relatively consistent going forward. Income for Debtor-wife based upon 2017 total income averaged based upon review of 2017 tax return

Fill ir	n this informa	ition to identify yo	our case:					
Debto		Jeffrey S Ba				Chec	k if this is:	
		oomey o Bu					An amended filing	
Debto	or 2 use, if filing)	Elizabeth A	Barrett				A supplement shown a supplement shown as a supplement as of the supplement as of the supplement as a supplemen	ving postpetition chapter the following date:
` .		runtau Caurt far tha	· COLITL	HERN DISTRICT OF OHIC			MM / DD / YYYY	
Unite	u States Banki	upicy Court for the	. 30011	TERN DISTRICT OF ONIC			IVIIVI / DD / TTTT	
Case (If kno	number own)							
		orm 106J						
		J: Your						12/1
infor	mation. If m		eded, atta	. If two married people and the shorther sheet to this no.				
Part 1.	1: Describe this a join	ribe Your House	hold					
١.	□ No. Go to							
	■ Yes. Doe	s Debtor 2 live	in a separ	ate household?				
	■ N □ Y	-	st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	<i>hold</i> of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.		■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Grandson		. 3	Yes
					Daughter		15	□ No ■ Yes
								■ res □ No
					Daughter		21	Yes
								□ No
	expenses o	oenses include f people other t d your depende	han _	No Yes			-	☐ Yes
expe	nate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the v		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
		or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	4. \$		0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		maintenance, re		upkeep expenses		4c. \$		55.00 37.50

5. \$

0.00

5. Additional mortgage payments for your residence, such as home equity loans

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	ettrey S Barrett	O (if los)	
ebtor 2 E	Elizabeth A Barrett	Case number (if known)	
. Utilities	S:		
	lectricity, heat, natural gas	6a. \$	364.00
6b. W	Vater, sewer, garbage collection	6b. \$	84.00
6c. T	elephone, cell phone, Internet, satellite, and cable services	6c. \$	475.00
6d. C	Other. Specify:	6d. \$	0.00
Food a	nd housekeeping supplies	7. \$	1,200.00
Childca	are and children's education costs	8. \$	300.00
Clothin	g, laundry, and dry cleaning	9. \$	200.00
. Person	al care products and services	10. \$	100.00
. Medica	I and dental expenses	11. \$	600.00
. Transp	ortation. Include gas, maintenance, bus or train fare.		
	include car payments.	12. \$	250.00
. Enterta	inment, clubs, recreation, newspapers, magazines, and books	13. \$	150.00
. Charita	ble contributions and religious donations	14. \$	100.00
. Insuran	nce.		
	include insurance deducted from your pay or included in lines 4 or 20.		
	ife insurance	15a. \$	145.34
	lealth insurance	15b. \$	0.00
15c. V	'ehicle insurance	15c. \$	263.98
	Other insurance. Specify:	15d. \$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 2		
Specify:		16. \$	0.00
	nent or lease payments:	47. 0	
	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	ayments of alimony, maintenance, and support that you did not re		0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form		
_	payments you make to support others who do not live with you.	\$	0.00
Specify:		19.	
	eal property expenses not included in lines 4 or 5 of this form or o fortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
		20c. \$	
	Property, homeowner's, or renter's insurance	· —	0.00
	Maintenance, repair, and upkeep expenses Iomeowner's association or condominium dues	20d. \$	0.00
		20e. \$	0.00
. Other:	Specify: Security System	21. +\$	65.00
. Calcula	ate your monthly expenses		
	ld lines 4 through 21.	\$	4,389.82
	ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1		.,
	d line 22a and 22b. The result is your monthly expenses.	\$	4,389.82
220. AU	a mio 22a ana 22b. The result is your monthly expenses.	Ψ	+,303.02
3. Calcula	ate your monthly net income.		
23a. C	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	6,690.17
23b. C	Copy your monthly expenses from line 22c above.	23b\$	4,389.82
			•
	Subtract your monthly expenses from your monthly income.	00 - 6	2 200 25
Т	he result is your monthly net income.	23c. \$	2,300.35
T 24. Do you For exan	he result is expect an nple, do you	your monthly net income. increase or decrease in your expenses within the year a expect to finish paying for your car loan within the year or do you expenses.	your monthly net income. 23c. \$ increase or decrease in your expenses within the year after you file this form? expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase
modificat	tion to the terms of your mortgage?		
■ No.			
	Explain here:		

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Fill in this inf	formation to identify your	case:		
Debtor 1	Jeffrey S Barrett			
	First Name	Middle Name	Last Name	
Debtor 2	Elizabeth A Barre			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
f two married You must file obtaining mo	d people are filing together this form whenever you fil	, both are equally resp le bankruptcy schedule a connection with a bar		
S	Sign Below			
Did you	pay or agree to pay some	one who is NOT an atto	orney to help you fill out bankruptc	y forms?
■ No				
☐ Yes	s. Name of person			Attach Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119)
that they	enalty of perjury, I declare rare true and correct. leffrey S Barrett rey S Barrett	that I have read the sur	mmary and schedules filed with this X /s/ Elizabeth A Barr Elizabeth A Barrett	rett
	ature of Debtor 1		Signature of Debtor 2	
Date	April 26, 2018		Date April 26, 201	8

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Fill in this infor	mation to identify you	r ease:			
Debtor 1	Jeffrey S Barrett	Middle Name	Last Name		
Debtor 2	Elizabeth A Barr	ett			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT C	OF OHIO		
Case number					
(if known)				-	Check if this is an
					amended filing
Official Fo	rm 107				
		Affairs for Indivic	duals Filing for B	ankruptcy	4/16
information. If n		attach a separate sheet to		equally responsible for sup y additional pages, write you	
	, , , , ,	rital Status and Where You	Lived Before		
	ır current marital statı				
_					
■ Married Not ma	-				
2. During the	last 3 years, have you	lived anywhere other than v	where you live now?		
□ No					
	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.	
Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	arket Street ro, OH 45066	From-To: 2002 - March 2016	■ Same as Debtor	1	■ Same as Debtor 1 From-To:
states and territor No Yes. M	ries include Arizona, Ca ake sure you fill out <i>Scl</i>	lifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Part 2 Expla	in the Sources of You	r Income			
Fill in the tot	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
□ No					
Yes. Fi	ll in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$31,456.74	☐ Wages, commissions, bonuses, tips	\$4,870.49
		☐ Operating a business		Operating a business	
Official Form 107			airs for Individuals Filing for B	, ,	page 1

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Debtor 2 Elizabeth A Barrett				Cas	Case number (if known)			
				Debtor 1		Dahtan 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		endar year: to December 3	1, 2017)	■ Wages, commissions, bonuses, tips	\$96,076.00	☐ Wages, com bonuses, tips	missions,	\$26,362.00
				☐ Operating a business		Operating a	ousiness	
		endar year befo to December 3		■ Wages, commissions, bonuses, tips	\$101,942.00	☐ Wages, com bonuses, tips	missions,	\$8,806.00
				☐ Operating a business		Operating a	ousiness	
L	_ist each	h source and th	e gross inco		you received together, list it detely. Do not include income	-		
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
		endar year: to December 3	1, 2017)	Retirement Income	\$72,584.00			
_		ner Debtor 1's of Neither Delindividual properties of During the 9	or Debtor 2's otor 1 nor De imarily for a	personal, family, or househo	r debts? umer debts. Consumer debi			1(8) as "incurred by an
		☐ Yes	paid that cre not include p	ditor. Do not include payment payments to an attorney for t	id a total of \$6,425* or more nts for domestic support obliq his bankruptcy case. 's after that for cases filed on	gations, such as ch	ild support a	nd alimony. Also, do
ı	Yes			both have primarily constructed you filed for bankruptcy, d	umer debts. id you pay any creditor a tota	al of \$600 or more?		
		■ No.	Go to line 7.					
			include payr		id a total of \$600 or more an bligations, such as child sup			
	Credito	or's Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for

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			Document	rage 44 or oc)		
	btor 1 btor 2	Jeffrey S Barrett Elizabeth A Barrett		_	se number (if known)	
7.		n 1 year before you filed for bankrupters include your relatives; any general pa					
	of whi	ich you are an officer, director, person ir iness you operate as a sole proprietor.	control, or owner of 20%	or more of their voting	g securities; and a	any managing a	igent, including one fo
		No Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	inside			yments or transfer a	any property on	account of a d	ebt that benefited an
	_	de payments on debts guaranteed or cos	signed by an insider.				
	_	No					
		Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount you		this payment
				paid	still owe	Include cred	litor's name
Pa	rt 4:	Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	List al modifi	n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. No					
	Case	Yes. Fill in the details. e title	Nature of the case	Court or agency		Status of th	ne case
		e number					
10.		n 1 year before you filed for bankrupt k all that apply and fill in the details belo		erty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.					
		litor Name and Address	Describe the Property		Date)	Value of the
			Explain what happene	ed			property
11.	accou	n 90 days before you filed for bankru unts or refuse to make a payment bec		cluding a bank or fii	nancial institutio	n, set off any a	amounts from your
	_	No Yes. Fill in the details.					
	Cred	litor Name and Address	Describe the action th	e creditor took	Date take	action was	Amount
12.		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		perty in the possess	ion of an assign	ee for the bene	efit of creditors, a
	_	No Yes					
Pa		List Certain Gifts and Contributions					
		n 2 years before you filed for bankrup	atov, did vou give any gif	ts with a total value	of more than \$6	00 ner nerson	2
10.	I	No .	ncy, and you give any gir	is with a total value	of more than wo	oo per person	•
		Yes. Fill in the details for each gift.	Describe the rifts		Dete	e vou corre	Value
		s with a total value of more than \$600 person	Describe the gifts	5		es you gave gifts	Value
		on to Whom You Gave the Gift and ress:					

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Jeffrey S Barrett
Elizabeth A Barrett

Case number (if known)

De	btor 2 Elizabeth A Barrett		Case number	(if known)		
11	Within 2 years before you filed for han	kruptov	did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?	
14.	No	кі ирісу,	uid you give any girts or contributions with a total	ii value of filore triair	\$000 to any chanty:	
	Yes. Fill in the details for each gift or	r contribut	tion.			
	Gifts or contributions to charities that		Describe what you contributed	Dates you	Value	
	more than \$600			contributed		
	Charity's Name Address (Number, Street, City, State and ZIP Co	ado)				
Pa	rt 6: List Certain Losses	oue)				
ıa	List Certain Losses					
15.	Within 1 year before you filed for bank or gambling?	ruptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,	
	□ No					
	Yes. Fill in the details.					
	Describe the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property	
	how the loss occurred		e the amount that insurance has paid. List pending	loss	lost	
			nce claims on line 33 of Schedule A/B: Property.			
	2008 Toyota Camry involved in	Repai	irs to vehicle covered by other driver's	September	Unknown	
	fender bender	insur	ance; no funds received directly by	2017		
		Debto	or			
	☐ No ☐ Yes. Fill in the details. Person Who Was Paid Address	rpropuro	cs, or credit counseling agencies for services require Description and value of any property transferred	Date payment or transfer was	Amount of payment	
	Email or website address Person Who Made the Payment, if Not	t You		made		
	Zingarelli Law Office, LLC 810 Sycamore Street Third Floor Cincinnati, OH 45202 nick@zingarellilaw.com		Attorney Fees - \$790.00 Filing Fee - \$310.00	September 2017 - March 2018	\$1,100.00	
	Greenpath		Pre-petition credit counseling	March 2018	\$25.00	
	www.greenpath.com					
17.		editors o	id you or anyone else acting on your behalf pay or to make payments to your creditors? ted on line 16. Description and value of any property	or transfer any prope	erty to anyone who Amount of	
	Address		transferred	or transfer was made	payment	

Debtor 1

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Debtor 1 Jeffrey S Barrett
Debtor 2 Elizabeth A Barrett

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and va property transferr		Describe any propayments receipaid in exchange	ved or debts	Date transfer was made		
	Person's relationship to you Community Housing 680 Market Street Springboro, OH 45066	Single family resoluted at 680 M Springboro, OH	larket Street;	Sold for \$140,	000.00	3/31/2016		
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect No Yes. Fill in the details.		y property to a se	lf-settled trust or				
	Name of trust	Description and va	alue of the proper	ty transferred		Date Transfer was made		
20.	sold, moved, or transferred? Include checking, savings, money market, or ot houses, pension funds, cooperatives, associati No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	tere any financial account ther financial account ons, and other finan st 4 digits of count number	ts; certificates of cial institutions. Type of account instrument	ents held in your deposit; shares i or Date acc closed, s moved, o transfere	in banks, credit u count was sold, or red	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accomplete Address (Number, State and ZIP Code)	ess to it? De	escribe the conte	·	Do you still have it?		
22.	■ No □ Yes. Fill in the details.	ace other than your		·				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the conte	nts	Do you still have it?		

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Debtor 1 Jeffrey S Barrett
Debtor 2 Elizabeth A Barrett

Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust			
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	- •				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	aw, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s	mental law defines as a hazardous	waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the following connections to an	y business?			
	■ A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-time or part-time				
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing execut	ive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation						

Case 1:18-bk-11567 Doc 1 Filed 04/26/18 Entered 04/26/18 13:47:56 Desc Main Page 48 of 68 Document **Jeffrey S Barrett** Debtor 1 Debtor 2 Elizabeth A Barrett Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: Pampered Chef Direct marketing of luxury kitchen SSN only **One Pampered Chef Lane** items From-To - Present Addison, IL 60101 N/A (self) Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey S Barrett /s/ Elizabeth A Barrett Elizabeth A Barrett Jeffrey S Barrett Signature of Debtor 1 Signature of Debtor 2 Date April 26, 2018 Date April 26, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re:		Case No.
Jeffrey S Barrett Elizabeth A Barrett		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I.

I.	Disclosure		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition in services rendered or to be rendered on behalf of the debtor(s) in contemplation of of follows:	n bankrup	tcy, or agreed to be paid to me, for
Fo	or legal services, I have agreed to accept	\$	3,700.00
Pri	ior to the filing of this statement I have received	\$	790.00
Ba	alance Due	\$	2,910.00
2.	The source of the compensation paid to me was: ■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other per associates of my law firm.	sons unle	ss they are members and/or
	☐ I have agreed to share the above-disclosed compensation with another person or of my law firm. A copy of the agreement, together with a list of the names of the attached.		

II. **Application**

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, 5. without itemization, an allowance of fees not to exceed \$3,700, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,700, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's a. financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
 - Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form c. 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be
 - Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, d. legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation

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will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in addressing any routine tax return or tax refund inquiries by the trustee, exclusive of any motion, objection, or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

April 26, 2018 /s/ Nicholas A	April 26, 2018	/s/ Nicholas A.
-------------------------------	----------------	-----------------

Date

Nicholas A. Zingarelli OH-0079110 Name Zingarelli Law Office, LLC 810 Sycamore Street Third Floor Cincinnati, OH 45202 513-381-2047 Fax: 513-263-9006

Zingarelli

nick@zingarellilaw.com OH-0079110 OH Case 1:18-bk-11567 Doc 1 Filed 04/26/18 Entered 04/26/18 13:47:56 Desc Main Document Page 51 of 68

Fill in this information to identify your case:						
Debtor 1	Jeffrey S Barrett					
Debtor 2 (Spouse, if filing)	Elizabeth A Barrett					
United States E	Sankruptcy Court for the: Southern District of Ohio					
Case number (if known)						

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 9,212.28 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. Net income from operating a Debtor 1 Debtor 2 business, profession, or farm Gross receipts (before all 0.00 2.265.02 deductions) Ordinary and necessary 0.00 -\$ 0.00 operating expenses Net monthly income from a Copy 0.00 \$ 2,265.02 here -> \$ 0.00 2,265.02 business, profession, or farm 6. Net income from rental and other real property Debtor 1 \$ 0.00 Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Elizabeth A Barrett Debtor 2 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for 9.212.28 2,265.02 11,477.30 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 11,477.30 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Copy here=> 11,477.30 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 11,477.30 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). x 12 137,727.60 15b. The result is your current monthly income for the year for this part of the form.

Jeffrey S Barrett

Debtor 1

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Debtor 1 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 5 Debtor 6 Debtor 1 Debtor 1 Debtor 1 Debtor 3 Deffrey S Barrett Debtor 3 Deffrey S Barrett				Case number (if known)			
16.	Calc	ulate t	he median family income that applies to yo	ou. Follow these step	os:		
	16a.	Fill in t	he state in which you live.	ОН			
	16b.	Fill in t	he number of people in your household.	5			
			he median family income for your state and s			\$	93,694.00
		To find	I a list of applicable median income amounts, tions for this form. This list may also be available.	go online using the		Ψ_	<u> </u>
17.			e lines compare?				
	17a.		Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do No				
	17b.		Line 15b is more than line 16c. On the top o 1325(b)(3). Go to Part 3 and fill out Calcul your current monthly income from line 14 ab	lation of Your Dispo			
Part	3:	Calc	ulate Your Commitment Period Under 11 L	J.S.C. § 1325(b)(4)			
18.	Сор	y your	total average monthly income from line 11	١.		\$	11,477.30
19.	cont	end tha	marital adjustment if it applies. If you are it calculating the commitment period under 11 come, copy the amount from line 13.				
			narital adjustment does not apply, fill in 0 on I	ine 19a.		-\$	0.00
	19b.	Subtra	act line 19a from line 18.			\$	11,477.30
20.	Calc	ulate y	our current monthly income for the year.	Follow these steps:			
	20a.	Copy I	ine 19b			\$_	11,477.30
		Multipl	y by 12 (the number of months in a year).				x 12
	20b.	The re	sult is your current monthly income for the ye	ar for this part of the	form	\$_	137,727.60
	20c.	Copy t	he median family income for your state and s	ize of household from	n line 16c	\$_	93,694.00
	21.	How d	lo the lines compare?				
			ine 20b is less than line 20c. Unless otherwis eriod is 3 years. Go to Part 4.	e ordered by the cou	rt, on the top of page 1 of this form, o	heck box 3,	The commitment
			ine 20b is more than or equal to line 20c. Unlo	ess otherwise ordere	d by the court, on the top of page 1 c	of this form, c	check box 4, The
Part	4:	Sign	Below				
	By s	igning h	nere, under penalty of perjury I declare that th	ne information on this	statement and in any attachments is	true and co	rrect.
v	le!	Jeffre	y S Barrett	Y /	s/ Elizabeth A Barrett		
^			Barrett		Elizabeth A Barrett		
	·		of Debtor 1		Signature of Debtor 2		
	Date		I 26, 2018 DD / YYYY	Ι	Date April 26, 2018 MM / DD / YYYY		
	If vo		xed 17a, do NOT fill out or file Form 122C-2.				
	•		sed 17b, fill out Form 122C-2 and file it with the	nis form. On line 39 o	f that form, copy your current monthly	/ income from	m line 14 above.

Jeffrey S Barrett

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Fill in	this inforn	mation to id	entify you	r case:											
Debto	r1 <u>.</u>	Jeffrey S E	arrett												
Debto	r 2	Elizabeth A	Rarrett												
	se, if filing)		Darrett												
United	l States Ba	ankruptcy Co	urt for the:	Southern	District of	Ohio									
Case i	number _ wn)									☐ Che	eck if th	is is ar	n amend	ed fili	ing
Officia	l Form 122	2C-2													
		3 Calc	ulatio	n of Yo	our Di	spos	able l	nco	me						04/16
		rm, you will riod (Officia			d copy of	Chapter 1	13 Statem	nent of \	our Curr	ent Monti	hly Inco	me and	l Calcula	tion c	of
space	is needed,	and accurate , attach a se s, write your	parate she	et to this f	form, Inclu	ıde the lir									
Part 1	Calc	ulate Your [Deductions	from You	r Income										
the	questions	Revenue Ser s in lines 6-1 nay also be	5. To find	the IRS sta	andards, g	o online	using the								
ехр	enses if the	pense amoui ey are highei do not deduc	than the s	tandards. D	o not inclu	ide any op	erating e	xpenses	that you	subtracted	I from inc	come in			
If yo	our expense	es differ from	month to	nonth, ente	er the avera	age expen	ise.								
Not	e: Line num	mbers 1-4 are	e not used i	n this form.	. These nui	mbers app	oly to info	mation i	required b	y a simila	r form us	ed in c	hapter 7 d	ases.	
5.	The num	ber of peop	le used in	determinin	ng your de	ductions	from inc	ome							
	plus the n	number of p number of an per of people	y additiona	I dependen								5			
Nat	ional Stan	ndards	You mu	ust use the l	IRS Nation	al Standa	rds to ans	swer the	questions	in lines 6	-7.				
6.		othing, and ols, fill in the d						ed in line	5 and the	e IRS Nati	onal		\$		1,975.00
7.	the dollar people wh	ocket health r amount for o tho are 65 or an this IRS a	out-of-pock olderbeca	et health ca ause older p	are. The nu people hav	ımber of p e a higher	eople is s r IRS allov	plit into t vance fo	two categ	oriespeo	ple who	are und	der 65 and	d	

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Jeffrey S Barrett Debtor 1 Elizabeth A Barrett Case number (if known) Debtor 2 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 5 7c. Subtotal. Multiply line 7a by line 7b. 245.00 Copy here=> \$ 245.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 0.00 245.00 7g. **Total.** Add line 7c and line 7f 245.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 659.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,308.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Chemical Bank** 1,666.01 Сору Repeat this amount 1.666.01 1,666.01 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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Debtor 1 Debtor 2	Elizabeth A Barrett	Case number (if known)	
11.	Local transportation expenses: Check the number of	vehicles for which you claim an ownership or operating expense.	
	□ 0. Go to line 14.		
	☐ 1. Go to line 12.		
	2 or more. Go to line 12.		
12.		dards and the number of vehicles for which you claim the	
	operating expenses, fill in the Operating Costs that app	ly for your Census region or metropolitan statistical area.	406.00
13.		Local Standards, calculate the net ownership or lease expense for each ve loan or lease payments on the vehicle. In addition, you may not claim the	
Ve	hicle 1 Describe Vehicle 1: 2013 Hyundai Tuc	son 51000 miles	
13a	Ownership or leasing costs using IRS Local Standard		
	Average monthly payment for all debts secured by Veh	· · · · · · · · · · · · · · · · · · ·	
100.	Do not include costs for leased vehicles.	00 1.	
	To calculate the average monthly payment here and or are contractually due to each secured creditor in the 60 bankruptcy. Then divide by 60.		
	Name of each creditor for Vehicle 1	Average monthly payment	
	Day Air Credit Union	\$\$	
	Total Average Monthly Paym	ent \$ 272.99 Copy Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less the	Copy net Vehicle 1 expense here => \$	212.01
Ve	hicle 2 Describe Vehicle 2:		
13d.	Ownership or leasing costs using IRS Local Standard	\$ <u>0.00</u>	
13e.	Average monthly payment for all debts secured by Vehleased vehicles.	cle 2. Do not include costs for	
	Name of each creditor for Vehicle 2	Average monthly payment	
	-NONE-	<u> </u>	
	Total average monthly payme	nt \$ 0.00 Copy Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense	Copy net	
	Subtract line 13e from line 13d. if this number is less the	an \$0, enter \$0	0.00
14.	Public transportation expense: If you claimed 0 vel Public Transportation expense allowance regardles	icles in line 11, using the IRS Local Standards, fill in the so of whether you use public transportation.	0.00
15.		med 1 or more vehicles in line 11 and if you claim that you may Il in what you believe is the appropriate expense, but you may Transportation. \$	0.00

Jeffrey S Barrett

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Debtor 1 Debtor 2 Flizabeth A Barrett

Case number (if known)

Oth		n addition to the expense dene following IRS categories		ns listed above,	you are allowed your monthly expense	s for	
16.	self-employment taxes, socia	d local taxes, such as income taxes, lude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	2,154.92			
17.	Involuntary deductions: The		uctions t	that your job red	quires, such as retirement		
	contributions, union dues, and Do not include amounts that		o, such a	as voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payme	ents that you make for your life insurance on your depe	spouse	's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments: T administrative agency, such a	as spousal or child support	paymer	nts.		\$	0.00
20	Education: The total monthly				You will list these obligations in line 35.	Ψ	
20.	as a condition for your job	, , ,	uucallo	ii iiiai is eiiilei i	equileu.		
	• •		child if	no public educa	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly Do not include payments for a	• • •		•	itting, daycare, nursery, and preschool.	\$	300.00
22.		and welfare of you or your	depend	lents and that is	amount that you pay for health care sont reimbursed by insurance or paid I entered in line 7.		
	Payments for health insurance	e or health savings accoun	ıts shou	ld be listed only	in line 25.	\$	455.00
23.	for you and your dependents, phone service, to the extent r income, if it is not reimbursed Do not include payments for l	such as pagers, call waitin necessary for your health and by your employer. pasic home telephone, intel	ng, calle nd welfa rnet and	or identification, are or that of your cell phone ser	you pay for telecommunication services special long distance, or business cell ur dependents or for the production of vice. Do not include self-employment	+\$	0.00
	, ,				ount you previously deducted.	\$ \$	6,406.93
24.	Add all of the expenses allowed Add lines 6 through 23.	owed under the IRS exper	ise allo	owances.		Ψ—	0,400.33
Add	itional Expense Deductions	These are additional de Note: Do not include ar					
25.					ses. The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health insurance		\$	895.52			
	Disability insurance		\$	14.10			
	Health savings account	+	\$	100.00	7		
	Total		\$	1,009.62	Copy total here=>	\$	1,009.62
	Do you actually spend this to				_		
	Yes		\$				
26.	continue to pay for the reason	nable and necessary care a f your immediate family who	and sup o is una	port of an elder ble to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.					nses that you incur to maintain the		
		Preven	tion and Service	es Act or other federal laws that apply.			

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Debtor 1 Debtor 2	Jeffrey S Barrett Elizabeth A Barrett	Case number (if known)					
	Additional home energy costs. Your home line 8.	e energy costs are included in your insurance and operating expe	nses on				
	If you believe that you have home energy co 8, then fill in the excess amount of home en	osts that are more than the home energy costs included in expensergy costs	ses on line)			
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the additionry.	nal	\$_	0.00		
		ren who are younger than 18. The monthly expenses (not more pendent children who are younger than 18 years old to attend a p					
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must explain why the amount already accounted for in lines 6-23.	unt				
	* Subject to adjustment on 4/01/19, and eve	ry 3 years after that for cases begun on or after the date of adjust	ment.	\$	0.00		
	80. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
		onal allowance, go online using the link specified in the separate o be available at the bankruptcy clerk's office.					
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00		
	Continuing charitable contributions. The instruments to a religious or charitable organization	amount that you will continue to contribute in the form of cash or nization. 11 U.S.C. § 548(d)(3) and (4).	financial				
	Do not include any amount more than 15%	of your gross monthly income.		\$_	100.00		
	Add all of the additional expense deductional lines 25 through 31.	ions.		\$	1,109.62		
Ded	uctions for Debt Payment						
33. F	For debts that are secured by an interest i	n property that you own, including home mortgages, vehicle 33a through 33e.					
	o calculate the total average monthly paymereditor in the 60 months after you file for bar	ent, add all amounts that are contractually due to each secured akruptcy. Then divide by 60.					
	Mortgages on your home			Averag	e monthly		
33a.	Copy line 9b here		=>	\$	1,666.01		
	Loans on your first two vehicles			·	1,000101		
33b.	•		=>	\$	272.99		
33c.				•			
				Ψ	0.00		
33d.	List other secured debts:						
Nam	e of each creditor for other secured debt	Identify property that secures the debt Does painclude or insura	taxes				
		□ No					
	-NONE-	□ Ye	s	\$			
				Φ			
		□ No					
			S	\$			
		□ No					
		☐ Ye	s +	\$			
33e	Total average monthly payment. Add lines	33a through 33d \$ 1,939.00	Copy total here=	•	1,939.00		

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Debtor 1 Debtor 2		ey S Barrett abeth A Barrett			Case	number (<i>if known</i>)		
			e 33 secured by your prima			ı		
		Go to line 35.	ur support or the support of	of your de	pendents?			
•		State any amount that you	must pay to a creditor, in ad- ssession of your property (ca					
Name	of the	creditor	Identify property that secure	es the debt		Total cure amount	Monti	nly cure
			5519 Selu Dr. Liberty	Townshi	p, OH			
Cher	nical	Bank	45011 Butler County		\$	5,151.00		85.85
					\$		$\div 60 = \$$ $\div 60 = +\$$	
					¥ 		. 00 – 1ф Сору	
					Total	\$ 85.85	total	85.85
05.0-			uah aa a mulaukku kau ahilal					
			uch as a priority tax, child : f your bankruptcy case? 11			at		
	No.	Go to line 36.						
_		Fill in the total amount of a	Il of these priority claims. Do	not include	e current or			
			ch as those you listed in line					
		Total amount of all past-d	lue priority claims			\$ 27,926.00	÷60 \$	465.44
36. Pro	ojecte	d monthly Chapter 13 plan	n payment		;	\$ 2,300.00	<u></u>	
			stated on the list issued by th					
		,	r districts in Alabama and No s Trustees (for all other distri		na) or by	< 6.50		
To	find a li	ist of district multipliers that inclu	ıdes your district, go online using	the link spe				
sep	arate II	nstructions for this form. This list	t may also be available at the bar	nkruptcy cle	rk's office.		Copy total	
Ave	erage	monthly administrative expe	ense			\$149.50	here=> \$	149.50
		of the deductions for deb	t payment.				\$_	2,639.79
Total D	Deduc	tions from Income						
38. Ad	d all d	of the allowed deductions.						
		ne 24, All of the expenses al	lowed under IRS					
		e allowances		\$	6,406.93	-		
C	opy lir	ne 32, All of the additional ex	kpense deductions	\$	1,109.62	-		
C	opy lir	ne 37, All of the deductions f	or debt payment	+\$	2,639.79			
						- 		
 To	otal de	eductions		\$	10,156.34	Copy total here=	> \$	10,156.34

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btor 1 btor 2	Elizabeth A B			Case	numb	er (<i>if known</i>)		
art 2:	Determine Yo	our Disposable Income Under 11	U.S.C. § 1325(b)(2)				
		rrent monthly income from line Current Monthly Income and C					. \$	11,477.30
ch dis rec	ildren. The mont ability payments ceived in accorda	bly necessary income you receithly average of any child support profer a dependent child, reported in nee with applicable nonbankruptopended for such child.	ayments, foster c Part I of Form 12	are payments, or 2C-1, that you	\$_	C	0.00	
em in '	nployer withheld for	retirement deductions. The mon rom wages as contributions for qu b)(7) plus all required repayments C. § 362(b)(19).	alified retirement	plans, as specified	\$_	1,420	0.55	
12. To	tal of all deducti	ons allowed under 11 U.S.C. § 7	707(b)(2)(A). Copy	y line 38 here=>	\$	10,156	5.34	
exp the	penses and you heir expenses. You	cial circumstances. If special circ nave no reasonable alternative, de must give your case trustee a de documentation for the expenses.	scribe the specia	I circumstances and				
Descri	ibe the special c	ircumstances		Amount of expen	se			
				\$				
				\$				
				\$				
			Total \$_	0.00	Cop	y ==> \$	0.00	
14. To	tal adjustments.	Add lines 40 through 43.		=> \$		11,576.89	Copy here=> -\$	11,576.89
15. Ca	lculate your mo	nthly disposable income under	§ 1325(b)(2). Sub	otract line 44 from lin	e 39		\$	-99.59
t 3:	Change in Inc	come or Expenses						
ha tim yo	ve changed or are ne your case will b u filed your petitic	or expenses. If the income in Formation belower, ill in the information belower, check 122C-1 in the first column in when the increase occurred, a	he date you filed w. For example, i n, enter line 2 in t	your bankruptcy peti f the wages reported the second column,	tion : I incr	and during the eased after		
Form	Line	Reason for change		Date of change		Increase or decrease?	Amount of	f change
1220 1220 1220 1220 1220 1220	C-2 C-1 C-2 C-1				_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$	
□ 1220 □ 1220						☐ Increase☐ Decrease	\$	

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Debtor 1 Debtor 2	Jeffrey S Barrett Elizabeth A Barrett		Case number (if known)					
Part 4:	Sign Below							
	sy signing here, under penalty of perjury you declare that the infor		·					
_	/s/ Jeffrey S Barrett Jeffrey S Barrett Signature of Debtor 1	Х	/s/ Elizabeth A Barrett Elizabeth A Barrett Signature of Debtor 2					
	April 26, 2018 MM / DD / YYYY	Date	P April 26, 2018 MM / DD / YYYY					

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Ace Exterminating 1920 Losantiville Cincinnati, OH 45237

Amazon PO Box 960013 Orlando, FL 32896

Bankcard Services 30200 Telegraph Rd. Suite 104 Franklin, MI 48025

Barclay PO Box 8803 Wilmington, DE 19801

Best Buy PO Box 9312 Minneapolis, MN 55440

Cabela's PO Box 82519 Lincoln, NE 68510

Capital One P.O. Box 30281 Salt Lake City, UT 84130

Chemical Bank 1736 Gezon Parkway SW Wyoming, MI 49519

Compunet Labs 2308 Sandridge Dr. Dayton, OH 45439

Credit One Bank PO Box 60500 City Of Industry, CA 91716

Day Air Credit Union 3501 Wilmington Pike Dayton, OH 45429

Department of Education/ Mohela P.O. Box 105347 Atlanta, GA 30348-5347

Direct TV PO Box 1259 Oaks, PA 19456

Elder Beerman Retail Services Dept 7680 Carol Stream, IL 60116 First National Credit Card PO Box 5097 Sioux Falls, SD 57117

First Premier Bank PO Box 5147 Sioux Falls, SD 57117-5147

First Savings Credit Card PO Box 2509 Omaha, NE 68103-2509

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kettering Health Network PO Box 781100 Detroit, MI 48278

Kohl's PO Box 3040 Milwaukee, WI 53201-3043

LendUp Visa 237 Kearny St #197 San Francisco, CA 94108

Menard's Dept. 7680 Carol Stream, IL 60116

Merrick Bank PO Box 5000 Draper, UT 84020

Middletown Cardiovascular 103 McKnight Drive Middletown, OH 45044

Northland Group PO Box 390846 Minneapolis, MN 55439

Ohio Department of Taxation Bankruptcy Division PO Box 530 Columbus, OH 43216-0530

Old Navy/Synchrony Bank PO Box 530942 Atlanta, GA 30353 PayPal Credit P.O. Box 105658 Atlanta, GA 30348-5658

Premier Health- Atrium Medical Center PO Box 182481 Columbus, OH 43218

Target
PO Box 673
Minneapolis, MN 55440-0673

UC Health P.O. Box 634856 Cincinnati, OH 45263-4856

UC Health - Cincinnati Physicians PO Box 630861 Cincinnati, OH 45263

Walmart P.O. Box 530927 Atlanta, GA 30353

Wayfair 4 Copley Place, 4th Floor Boston, MA 02116